

AF JHW

STORM & HEMINGWAY

A LIMITED LIABILITY PARTNERSHIP

EMERSON V. STORM
D. SCOTT HEMINGWAY

PRESTON COMMONS WEST • SUITE 460
8117 PRESTON ROAD
DALLAS, TX 75225

OF COUNSEL
JOHN G. FISCHER
JOHN W. MACPETE
MARK D. PERDUE

MALCOLM W. PIPES
ROBIN L. BARNES
DAWN C. WOLFF
GEORGE M. TOMPKINS
CHARLES D. HERRICK

INTELLECTUAL PROPERTY LAW

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WWW.ALLJPLAW.COM
FACSIMILE: (214) 739-5209

WRITER'S DIRECT PHONE
(214) 292-8301

October 19, 2004

Via Facsimile and First Class Mail

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

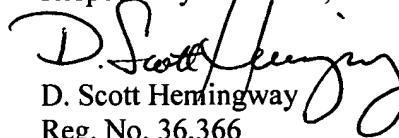
Re: After Final Response to Office Action
For Security Framework for an IP Mobility System Using
Variable-Based Security Associations and Broker Redirection
Serial No.: 09/595,551
Filed: June 16, 2000
Discl. No.: 10726RRUSO2U
Our File No.: NNI 02608 PTUS (P1003)

Enclosed for filing are the following papers relating to the above-identified application for patent:

- After Final Response to Final Office Action
- Request for Telephone Interview with Examiner

Please file the response and schedule a telephone conference. It is believed that no additional fees are necessary for this filing. If additional fees are required for filing this response, then the appropriate fees should be deducted from D. Scott Hemingway's Deposit Account No. 501,270.

Respectfully submitted,


D. Scott Hemingway
Reg. No. 36,366
Attorney for Applicant

CERTIFICATE OF MAILING

I hereby certify that this correspondence is, on the date shown below, being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date:

October 19, 2004


Amy Kasper

Applicant Initiated Interview Request Form

Application No.: 09/595,551 First Named Applicant: Patil et al
Examiner: Benjamin E. Lanier Art Unit: 2132 Status of Application: Final - Pending

Tentative Participants:

(1) D. Scott Hemingway (2) Malcolm Pipes
(3) _____ (4) _____

Proposed Date of Interview: November 9 or 10, 2004 Proposed Time: 10:00 AM(EDT)(AM/PM)

Type of Interview Requested:

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☒ NO

If yes, provide brief description: _____

Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) Rej	<u>1-37</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Amend	<u>1, 11, 20, 29</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Continuation Sheet Attached					

Brief Description of Arguments to be Presented: Amendments to independent claims make the claims allowable.

An interview was conducted on the above-identified application on _____.

NOTE: This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Applicant/Applicant's Representative Signature

Examiner/SPE Signature

Typed/Printed Name of Applicant or Representative

Registration Number, if applicable

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.